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FEE TRANSMITTAL

Patent fees are subject to annual revision on October 1.

These are the fees effective October 1, 1997.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$ 804.00)

Complete If Known

Application Number	
Filing Date	December 5, 2000
First Named Inventor	Gabe C. Gavrila et al.
Examiner Name	
Group / Art Unit	
Attorney Docket No.	448

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number
Deposit Account Name

Charge Any Additional Fee Required Under 37 C.F.R. §§ 1.16 and 1.17 Charge the Issue Fee Set in 37 C.F.R. § 1.18 at the Mailing of the Notice of Allowance

2. Payment Enclosed:

Check Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
101 790	201 395	Utility filing fee		710.00
108 330	208 165	Design filing fee		
107 540	207 270	Plant filing fee		
108 790	208 395	Reissue filing fee		
114 150	214 75	Provisional filing fee		
SUBTOTAL (1) (\$)				

2. EXTRA CLAIM FEES

	Extra Claims	Fee from below	Fee Paid
Total Claims	23	-20** = 3 x 18 = 54.00	
Independent Claims	2	-3** = 0 x 18 =	
Multiple Dependent			

**or number previously paid, if greater; For Reissues, see below

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description
103 22	203 11	Claims in excess of 20
102 82	202 41	Independent claims in excess of 3
104 270	204 135	Multiple dependent claim, if not paid
109 82	209 41	** Reissue independent claims over original patent
110 22	210 11	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$ 54.00)		

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
105 130	205 65	Surcharge - late filing fee or oath	
127 50	227 25	Surcharge - late provisional filing fee or cover sheet	
139 130	139 130	Non-English specification	
147 2,520	147 2,520	For filing a request for reexamination	
112 920*	112 920*	Requesting publication of SIR prior to Examiner action	
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action	
115 110	215 55	Extension for reply within first month	
116 400	216 200	Extension for reply within second month	
117 950	217 475	Extension for reply within third month	
118 1,510	218 755	Extension for reply within fourth month	
128 2,060	228 1,030	Extension for reply within fifth month	
119 310	218 155	Notice of Appeal	
120 310	220 155	Filing a brief in support of an appeal	
121 270	221 135	Request for oral hearing	
138 1,510	138 1,510	Petition to institute a public use proceeding	
140 110	240 55	Petition to revive - unavoidable	
141 1,320	241 660	Petition to revive - unintentional	
142 1,320	242 660	Utility issue fee (or reissue)	
143 450	243 225	Design issue fee	
144 670	244 335	Plant issue fee	
122 130	122 130	Petitions to the Commissioner	
123 50	123 50	Petitions related to provisional applications	
126 240	126 240	Submission of Information Disclosure Stmt	
581 40	581 40	Recording each patent assignment per property (times number of properties)	40.00
146 790	246 395	Filing a submission after final rejection (37 CFR 1.129(a))	
149 790	249 395	For each additional invention to be examined (37 CFR 1.129(b))	

Other fee (specify) _____

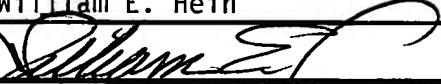
Other fee (specify) _____

Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 40.00)

SUBMITTED BY

Complete (if applicable)

Typed or Printed Name	William E. Hein	Reg. Number	26,465
Signature		Date	12/5/00

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



EM281733313

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Date of Deposit, December 5, 2000
I hereby certify that this paper or fee is being deposited with the
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PI0/SB/05 (2/98)

Approved for use through 09/30/2006. GPO 0007-0006
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UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No. 448
		First Inventor or Application Identifier
		Gabe C. Gavrilas et al
		Title
		METHOD AND CIRCUITS FOR PERFORMING OFFLINE
		Express Mail Label No. EM281733313 CIRCUIT TRIMMING

APPLICATION ELEMENTS		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231	
See MPEP chapter 600 concerning utility patent application contents.			
1. <input checked="" type="checkbox"/> XXX	Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)	<input type="checkbox"/> Microfiche Computer Program (Appendix)	
2. <input checked="" type="checkbox"/> XXX	Specification [Total Pages 15] (preferred arrangement set forth below)	7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)	
	<ul style="list-style-type: none"> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 	a. <input type="checkbox"/> Computer Readable Copy	
3. <input checked="" type="checkbox"/> XX	Drawing(s) (35 U.S.C. 113) [Total Sheets 4]	b. <input type="checkbox"/> Paper Copy (identical to computer copy)	
4. <input type="checkbox"/> Oath or Declaration [Total Pages 3]	c. <input type="checkbox"/> Statement verifying identity of above copies		
ACCOMPANYING APPLICATION PARTS <ul style="list-style-type: none"> 8. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 9. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> (when there is an assignee) <input type="checkbox"/> Power of Attorney 10. <input type="checkbox"/> English Translation Document (if applicable) 11. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 12. <input type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 14. <input type="checkbox"/> Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application (PTO/SB-09-12) <input type="checkbox"/> Status still proper and desired 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Other: 			
5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked)	<p>* NOTE FOR ITEMS 1 & 14: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.33).</p>		
<p>The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered to be part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p>			

* NOTE FOR ITEMS 1 & 14: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.37), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.38).

17. If a CONTINUING APPLICATION , check appropriate box, and supply the requisite information below and in a preliminary amendment:				
<input type="checkbox"/> Continuation	<input type="checkbox"/> Divisional	<input type="checkbox"/> Continuation-in-part (CIP)	of prior application No:	1 _____
Prior application information: Examiner _____			Group / Art Unit: _____	
18. CORRESPONDENCE ADDRESS				
<input type="checkbox"/> Customer Number or Bar Code Label <div style="border: 1px dashed black; padding: 5px; display: inline-block;">(Insert Customer No. or Attach bar code label here)</div>			or <input checked="" type="checkbox"/> Correspondence address below	
Name	William E. Hein			
	Attorney at Law			
Address	P.O. Box 335			
City	Loveland	State	Colorado	Zip Code
Country	U.S.A.	Telephone	970-667-6741	Fax
				970-532-3223

Name (Print/Type)	William E. Hein	Registration No. (Attorney/Agent)	26,465
Signature		Date	December 5, 2000

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